FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)				
Lee Irwin Fisher				
(b) Address (number and street)		Check if address changed	Identification Number	
P.O. Box 1418		· · · · · · · · · · · · · · · · · · ·	S0OH00158	
(c) City, State and ZIP Code			3. Is This New	Amended (A)
Columbus	OH	43216	Statement (N)	OR (A)
4. Party Affiliation	5. Office Sought	6. State & Dis	strict of Candidate	
DEMOCRATIC PARTY	Senate	OH 00)	
DI	ESIGNATION OF PR	INCIPAL CAMPAIGN	COMMITTEE	
7. I hereby designate the following name	ed political committee as my	Principal Campaign Committee	e for the 2010 (year of election)	election(s).
NOTE: This designation should be	e filed with the appropriate	office listed in the instruction	ns.	
(a) Name of Committee (in full)				
Fisher for Ohio				
(b) Address (number and street)				
P.O. Box 1418				
(c) City, State and ZIP Code				
Columbus	ОН	43216		
 I hereby authorize the following name candidacy. NOTE:This designation should be 			ace, to receive and expendituring	s on benail of my
(a) Name of Committee (in full)				
(b) Address (number and street)			•	
(c) City, State and ZIP Code				
I certify that I have ex	camined this Statement and	d to the best of my knowledge	e and belief it is true, correct,	and complete.
Signature of Candidate			Date	
Lee Irwin Fisher	The		08/09/2010	
NOTE:Submission of false, erroneo	us or incomplete information	on may subject the person si	igning this Statement to penal	ties of 2 U.S.C.§437g.
		<u> </u>		FEC FORM 2 (REV. 02/2009)

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

	(Including Joint Fundraising Representatives)				
I hereby authorize the following na candidacy.	med committee, which is NOT my principal campaign committee, to receive and expend fur	nds on behalf of my			
NOTE: This designation should be filed with the principal campaign committee.					
(a) Name of Committee (in fu	all)				
Senate 2010					
(b) Address (number and str	eet)				
PO Box 1174 c/o Whitney Burns					
(c) City, State and ZIP Code					
Springfield	22151				
	DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ADDITIONAL]			
I hereby authorize the following na candidacy.	med committee, which is NOT my principal campaign committee, to receive and expend fur	nds on behalf of my			
NOTE:This designation shou	uld be filed with the principal campaign committee.				
(a) Name of Committee (in fu	all)				
Ohio Senate 2010					
(b) Address (number and str	eet)				
120 Maryland Ave. NE					
(c) City, State and ZIP Code					
Washington	20002				
	DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ADDITIONAL]			
I hereby authorize the following natical candidacy.	med committee, which is NOT my principal campaign committee, to receive and expend fur	nds on behalf of my			
NOTE:This designation shou	ald be filed with the principal campaign committee.				
(a) Name of Committee (in fu	all)				
Committee for a Better Fo	uture				
(b) Address (number and str	eet)				
426 C St. NE					
(c) City, State and ZIP Code					
Washington	20002				

Plymouth

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)
I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.
NOTE: This designation should be filed with the principal campaign committee.
(a) Name of Committee (in full)
4 Senate Victory
(b) Address (number and street)
4190 Vinewood Lane Suite 111-554
(c) City, State and ZIP Code

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